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ABSTRACT

Caregivers must build a trusting, loving relationship before trying to toilet train any child. Before toilet training begins, myelinization, a neurological development necessary for controlling sphincter muscles, must be complete and toddlers must be able to sit easily for long periods. To help children recognize toilet needs, caregivers should watch for children's clutching signs. Bladder capabilities differ, readiness for toilet learning differs widely, and boys and girls differ in their ease with toilet learning. Caregivers should pay attention to their children's cues to determine readiness for toilet learning. Since language aids in toilet training, caregivers should wait until children can speak before beginning training. Caregivers should not shame a child when toilet training, nor withdraw love as punishment when toddlers have difficulty with training. Rather, caregivers should be patient and toilet train without breaking a toddler's will. Toddlers can watch others model the use of a toilet, and can be taught the process in component skills (lowering pants, sitting on the potty chair, releasing sphincter muscles, and so forth). Toddlers should use a potty seat at floor level. When accidents happen, caregivers should explain the importance of toileting in appropriate places and remember that toilet learning takes time, cooperation, and alertness. (MM)

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TOILET LEARNING

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Toilet learning remains a sometimes puzzling, sometimes mysterious, sometimes difficult period in caregiver - toddler relationships. Often, adults who have been most patient with an infant or toddler's need for a bottle or a pacifier orally, will not understand that a little indulgence of a young one's need to stay in diapers a bit longer goes a long way toward creating a less stressed climate for growth and for navigating the already difficult terrain known as the "terrible twos". Even when daytime control is established, night bed-wetting may continue for some children.

What are some ideas about learning sphincter control and more appropriate uses of the potty and toilet that can be helpful for families and for non-family caregivers? Below are twenty tips that may help adults to reframe ideas about children's toilet learning timetables and to understand this big step toward maturity from a tot's point of view.

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Twenty Tips for Parents and Caregivers

1. We learn from those whom we love.

Build a trust/love relationship before you try to toilet train any child. Toddlers will learn from a person they feel secure and comfortable with and from whom they do feel genuine

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commitment and caring. If children feel that you have been tender, attuned to their distress, responsive and gentle in meeting their early needs for nurturance, then they will identify with you. They will want to learn how to be like the caring, cherishing adult that you are. They will want to learn the new socially more mature skills you wish them to learn, such as making "poop" and "pee" on the potty or toilet and not in diapers or corners of a room.

2.Bladder capabilities differ.

Remember each child's bladder does not hold the same number of cubic centiliters of liquid. Some children's (and some adults') bladders can only hold a smaller amount of urine before pressure on the bladder causes an uncomfortably full sensation and urgency to void. Thus, one readiness sign is when the toddler wakes up dry frequently from a long nap or even a night's sleep. When bladder control is in great difficulty beyond the preschool years, pediatric advice must be sought [1]

3.Myelinization must be complete.

Long motor neurons reach from the Betz cells of the motor cortex of the brain down to the urethral sphincters (controlling the flow of urine) and the anal sphincters (controlling the opening from which bowel movements come). For voluntary control, these long motor neurons must be fully covered with a white fatty

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[1]. For children incontinent well after the preschool period, sometimes pediatricians prescribe a nasal spray DDAVP (desmopressin acetate) to stimulate an antidiuretic hormone that is insufficient in some children who lack bladder control.

sheath, myelin. This myelinization permits swift nerve messages and thus promotes fast, voluntary control of motor responses such as opening and closing the sphincter muscles so that urine and stools can be passed out or held in. Full myelinization may not be in place until about 24 months.

4. Sitting still is hard for toddlers.

Be sure your toddler can sit easily and for a long while before beginning training. Sitting still for long periods of time is extremely difficult for toddlers. Many toddlers are on the go so much that even changing diapers necessitates that the adult learn acrobatic skills of kneeling down and changing diapers in a hallway while the toddler is vertical and on the move! Wait until your toddler CAN sit still for a longer period of time before attempting to toilet train.

5.Cues from the body help tots recognize toilet needs.

Some babies are not as aware of proprioceptive feedback from bowel or bladder pressures. Until toddlers start to clutch themselves, so that you are sure they are getting body feedback about fullness and pressure on the sphincters to let go, toilet training will be difficult. Watch for these "clutching" signs.

6. Love withdrawal is devastating for toddler toilet learning.

Do not withdraw love because toilet learning is difficult for a youngster. Do not equate a toddler's "making" for you on the toilet with "making" love happen between you. Your genuine affection should not be contingent, or depend on, whether or not your toddler is trained as early as either you wish, or another

sibling was, or as other children in the childcare facility. If you withhold love or radiate your disapproval because a toddler is having a tough time learning more mature toileting behaviors, then you are giving a powerful message that imposing your will and your power is more important to you than ensuring continuity of the love relationship between you and your child. This can distort later intimate relationships when the child is an adult who may value and insist on power rather than egalitarian affection in love affairs.

7. Not all children are ready at the same age.

Readiness for toilet learning differs widely among children. Toddlers are ready for more mature behaviors such as eating neatly with a spoon or toileting on a potty at very different times. The "window" for normal toileting learning is large (Honig, 1992). Some children are capable of sphincter control as young as 18 months. Some are not ready until they are about four years old.

> Naftali, a bright, articulate youngster, was the only 3-year old still in diapers in his daycare class. "I am not ready to get out of diapers," he remarked easily, when questioned. "But maybe when I go to visit grandpa and grandma over the Christmas vacation, then maybe I will be ready to go on a potty." And sure enough, a few months later, he and his family travelled afar to the grandparents for the holidays, and he was soon out of diapers. Some kids have eloquent speech that works wonders long before their

anal and urethral sphincters work well.

8. Read a child's readiness cues.

Tune into your child's cues to determine readiness for toilet learning. Some children will tell you when they are ready for toilet learning. Jonathan was nearly three and still in diapers - double diapers that made him feel really overpadded on his bottom. One day he asked his mom, "No put on diapers any more, mama". "But honey," she explained, "the washing machine is two flights down stairs. And if you pee in your pants or in bed at nap time, then mama will have to keep running up and down the steps to do a lot more laundry. That is hard for me." "Me no make pee-pee in diapers anymore", he assured her. And so she put on training pants and, with but few accidents, this little boy was toileting like his older siblings. It is important to WAIT until a child feels READY for this developmentally appropriate task. Using a toilet the way adults do is a task that must be accomplished- but at very different ages for different youngsters. Fluid restriction at nap or bed time may be very necessary even for some preschoolers who have already learned toileting. Also, learning to wipe themselves carefully after a bowel movement may take years after preschoolers have learned to use the potty regularly. Adults still have a wiping job to do long after potty use is fairly routine.

9. Males and females differ in enuresis rates.

Boys and girls differ in toilet learning ease. Male children have a harder time with enuresis (voiding urine

involuntarily) than females. That is, more male children have bladder accidents for longer periods of time. Thus, harshness or early training may cause even more discouragement and anger between adult and a male child in families who insist on forcing the toileting issue too early.

10. Infections interfere with toilet learning.

Infections can wreck toilet training plans. Infections of the bladder or the urethra will make toilet training much more difficult. For example, children may develop infections if allowed to sit in play pools on a lawn where the water has not been changed in days, and where youngsters throw dirt and mud into the water. Infections are also more likely if fecal material gets into the urinary tract. Adults need to be quite careful to wipe a little girl's anus away from the vaginal area. Because voiding is far more frequent when there is infection, the infection must be cleared up before toilet training can be started. Also, blockage of urine is more likely if a toddler is made anxious by too-early training. The child, worried about being "good", may withhold urine until an adult decides it is time to "go potty". Thus, her anxiety means that damp, warm urine is stored in the body, encouraging harmful bacteria to grow (Brown, 1981).

11. Potties make toddlers feel more secure.

Choose a potty that sits comfortably on the floor. Many tots are frightened of a toilet. Their bottoms are too tiny and when a booster seat is used on the toilet, they feel they are

even higher up and thus further from the safety of the floor. Some children have fears that they, as well as their bowel movements, could somehow be swept down the drain when a toilet is flushed. Empathize with your toddler. Use a potty seat that feels comfortable, sturdy and is at floor level where the toddler's feet can rest firmly on the floor to provide added security. Children can gradually be introduced to adult toilet use as they feel more sure of their toileting skills and their body balance.

12.Don't gush and flush!

Do not flush waste from the potty bowl into the toilet immediately after lavish praise of a toddler's "production". When you flush the waste products down the toilet and they disappear forever with a loud roar, right after you have been gushing at length over a pee and poop a child produced, this may seem bewildering and contradictory behavior to a very young child. His poop was precious; yet you tossed it away with a mysterious whoosh!

13. Child words are tools to support toilet learning.

Wait for words before you potty train. A child who can say the words "poop" and "pee" and can label these body waste products will be more ready for toilet training. Steer clear of euphemisms for body parts. Calling a penis a "faucet" or a "tinkle" is inappropriate, for example. Also the adult words "urine" and "bowel movement" may be far too complex for the phonological capabilities of a toddler. Most toddlers can manage

the words 'pee' and 'poop'. Language aids toilet learning. Toddlers need to understand your requests and explanations. For preschoolers who are still having toilet learning troubles, sometimes the use of a fantasy story about a water-storing camel helps (Mack, 1989).

14.Shaming a child is detrimental to good mental health.

Shame is an evil legacy in some families. Before a child can speak well or remember well, some parents shame a baby for not being able to control urinary and bowel sphincters. If a child grows up thinking that he or she is bad and not loved,then there will be trouble in their ease of intimate relationships many years later. Because the urogenital region may be associated with adult shaming, a child may grow up and feel that the sexual area is dirty or secretly shameful, since sexual and toileting parts of the body lie so close together. Because a parent has created angry shaming feelings, that child may grow up and re-create negative interaction patterns in turn as a parent, without any awareness of where anger and rage toward his or her own little one is coming from. Yes, toileting must be taught. No, shaming and rage are not the way to toilet train. Watch for your child's SIGNALS OF READINESS. Then introduce the potty and persist calmly in trying to get a child comfortable about sitting on and using the potty.

15. Count on children's copying you.

Children love to copy behaviors of their special adults. A two-year-old who lays hands on her daddy's shaver will pretend

carefully with up and down strokes to shave her face. Modeling is a powerful tool for caregivers to count on as they are toilet training toddlers. As a growing toddler sees how papa urinates standing up at a toilet, as a little girl watches an older sister or cousin using a toilet, so the little one will want to copy what admired older relatives are able to do.

16. Be patient: Toilet train without breaking a toddler's will.

No normally functioning child will grow up to walk down the wedding aisle in diapers! With some children, toilet training takes a few weeks. If the child is not ready, the process will take far longer. Power struggles can go on for months and months, and permanently mar the adult-child relationship. Grim times on the potty, coercion and fear, are not the feelings a toddler needs to associate with the urogenital region. Later attitudes toward sexuality, later bouts of constipation, or overuse of laxatives, and feelings of tension or shame about going to the toilet in strange places may be a legacy of battles over toilet training years before.

Toddlers are in Erikson's second stage of emotional development (Honig, 1993). They see-saw between emerging needs to be brave, separate autonomous little persons and doubt or even rage when thwarted in their efforts. They struggle to assert their wills and try to control the world through "No" - saying. Maintaining a reasonable balance between a toddler's sometimes imperious wishes and adult wishes is already a difficult achievement for caregivers. Some adults find toddler wild

exuberance and endless curiosity exhausting and aggravating. They respond by trying to crush a toddler's adventuresome spirit during this period with a torrent of prohibitions. Toilet training is one more crushing burden for some young children. A child's bottom, his urogenital region, belongs to him. If, before a child is ready, an adult coerces a child too strongly as to where and when to release products of the bladder and rectum, then that child may feel a panicky loss of control over his or her own body. This can translate into extreme stubbornness and pickiness in other areas of daily life. Delaying the onset of toilet training for a few months may save many harmful battles of wills between caregiver and a toddler. Adults need to realize how it feels when someone "makes" you "make" on the potty before you are ready.

17. Work on a process of building component skills.

Adults can approach toileting learning as they would think through any other learning situation. They must assess each of the task components and decide how prepared and how skillful the child is for remembering the sequence of components and for carrying out each component. For example, in self-sufficient toileting, the child must be able to walk to the potty chair, grasp pants and lower pants, sit self on the chair, voluntarily release sphincter muscles, wipe self, stand up without tipping over the potty chair, raise pants and re-dress self, remove urine-filled pot from the potty, and empty the pot carefully into the toilet. Some preschool children with sequencing or motoric

skill difficulties and certainly many children with developmental delays who are in integrated childcare settings, may not be able to carry out all these steps effectively. Caregivers need to decide which component skills a child can accomplish, which ones the adult will assist with, and which ones can be gradually taught.

18.Accidents will happen; Use firmness,give reasons.

When your toddler is well on the way toward potty training and occasionally has an accident, what should you do?

Stress is a sure predictor of toileting accidents. Try to reduce all other stresses in a toddler's life while you are teaching toileting (Ross, 1982). If adults take a toddler into an unfamiliar environment, or put too great demands on the toddler for neat eating or for sitting still for long periods, then they are likely to be frustrated as more toileting accidents occur.

If the toddler was deeply engrossed in play and did not attend to the proprioceptive signals that his bladder was full, then simply be sure you give reminders once in a while, or, better, matter-of-factly explain it is potty time every few hours, and take that child to the potty to prevent such inadvertent accidents.

Sometimes, accidents occur because the importance of toileting in appropriate places like a potty or a toilet has not yet come clear intellectually, even though a three or four-year-old is quite capable of sphincter control and does use the potty.

Roy got up from a nap, climbed on top of his beautiful quilt, took down his pants and pooped on the new quilt. Mama, seeing the mess, explained firmly to him that "Doggies poop wherever they want to, like the street or in bushes. But people poop in a potty. You are a person. Persons know better than doggies do. You know how to poop in a potty. I don't want to clean up a poop from your beautiful quilt. You need to poop in the potty."

There were no more post-nap-time poop deposits on his bedding. Roy needed to be remended how special a person he was and that he knew lots more than an animal did how to make a poop in a special place, a potty.

19. Sociable others can sometimes help a toddler learn.

Be aware when you are too anxious or exasperated over the slow or uneven progress of toilet learning. Perhaps another adult in the family or a co-worker in a childcare center, can approach the process with less tension and impatience. Sometimes older siblings can help.

Little Maddy had resisted with loud protests any attempts by her parents to toilet train her. Yet, about a half year later, her six year old brother led her by the hand into the living room and announced proudly, "Maddy made on the potty." She had wanted to sit on the toilet like her big brother. So he had helped her by sliding down her diaper and lugging her up on the toilet seat and cheerfully urging her to pee like a big person. And she had! Maddy was

grinning with pride from ear to ear. Copying an admired older sibling or peer can sometimes galvanize an older toddler to learn to use the toilet.

Toileting on potties is actually a sociable time in some childcare centers. Toddlers talk to each other while on their potties. Some toddlers love to use potty-sitting time to look at picture books and point to favorite characters and tell themselves the storyline out loud. Be sure to have some interesting picture books on the floor or on a low shelf nearby.

20. Learning more mature behaviors takes time.

Toilet learning takes time. It must be taught. But the process requires cooperation between adult and child, alertness (but not grim, jumpy hawk-eyed hovering!) to when a toddler in training pants may need to be taken for a preventive visit to the potty, and a willingness to be flexible when learning has its ups and down initially. Growing up is not always fun. But the adventure of being a more mature person, more like the adults whom you love and admire, makes the learning process worth while for the young child.

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